IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: James E. Selis

Application No.: 10/631,204 Group No.: 3773

Filed: July 31, 2003 Examiner: M.R. Tyson

For: BIOPSY DEVICES AND METHODS

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Applicant has previously paid the issue fee in the amount of \$700.00 on August 27, 2007 and \$755.00 on November 6, 2009. Applicant believes that no fees are due at this time; however, if this is incorrect and an additional fee is due, Applicant grants authorization to charge Deposit Account No. 50-1097.

If you should have any questions, please contact me at 248-292-2920.

Date: Jan. 12, 2010

Daniel P. Aleksynas Registration No. 62,551 Dobrusin & Thennisch PC 29 W. Lawrence Street, Suite 210 Pontiac, MI 48342 248-292-2920

Transmittal of Payment of Issue Fee (37 C.F.R. § 1.311--page 1 of 1

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being sent via EFS to USPTO.GOV:

Date: 110 2010

Signature

Michelle Best

(type or print name of person certifying)

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrected maintenance fee notificatio	below or directed others.	erwise in Block 1, by (a) specifying a new co	rrespondence address	; and/or (b) i	ndicating a sepa	rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 25215 7590 12/28/2009				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Filed Via EFS @ USPTO.gov Certificate of Mailing or Transmission			
DOBRUSIN & THENNISCH PC 29 W LAWRENCE ST SUITE 210				Filed Vie	tificate of M	ailing or Transi	mission
				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
PONTIAC, MI 48	342		ĺ	Michelle	*****		(Depositor's name)
			ļ ,	Michelle	Roof		(Signature)
				January	- 12 . 6	2010	(Date)
APPLICATION NO.	FILING DATE	***************************************	FIRST NAMED INVENT	OR (DOCKET NO.	CONFIRMATION NO.
10/631,204	10/631,204 07/31/2003		James E. Selis	James E. Selis		1142-001 2183	
TITLE OF INVENTION: E	BIOPSY DEVICES AN	ND METHODS					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	E FEE TOT	TAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$0	\$1455		\$755	03/29/2010
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS				
TYSON, MELANIE RUANO		3773	606-151000				
 Change of correspondence CFR 1.363). 	ce address or indication	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Dobrusin &					
Change of correspond Address form PTO/SB/1	dence address (or Chai 22) attached.	ige of Correspondence	or agents OR, altern	atively,	-	2 Thonn	iach DC
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	tion (or "Fee Address"	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND			_			·	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Please check the appropriate	e assignee category or	categories (will not be pr	rinted on the patent):	Individual Co	orporation or o	other private gro	up entity Government
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.							
Publication Fee (No s		Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 501097 (enclose an extra copy of this form							
5. Change in Entity Status a. Applicant claims S			☐ b. Applicant is no l				
NOTE: The Issue Fee and Pinterest as shown by the reco	ublication Fee (if requ	ired) will not be accepted	d from anyone other tha	-			
Authorized Signature	DoniOa	Jahayne-		Date	àn. /	2,2011	3
Typed or printed name Daniel P. Aleksynas Registration No. 62,551							
This collection of informatic an application. Confidential submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313- Under the Paperwork Reduc							